

Parent Notification of Child Care Sick Policy

Provider's Name _____ Child's Name _____

Children in child care are exposed to germs carrying disease and illness. I cannot completely prevent the spread of disease but this sick child policy helps me reduce the spread of sickness and disease whenever possible for all children in my care.

- I will not provide care for a sick child if the health of other children is at risk. Please keep your child home if s(he) is sick. A child that is sick cannot participate in daily activities and routines and cannot be successful in group care.
- You must have a plan for back-up care when your child is excluded from child care if you are not able to leave or stay at home from work to care for your sick child.
- Each morning I perform a quick health assessment on your child, as well as throughout the day.
- If a child is ill upon arrival, you will be asked to take the child home. Children showing signs or symptoms of illness must remain at home.
- If your child becomes ill while in my care, I will notify you so you can make arrangements to pick up your child as soon as possible.
- If you are not reachable, I will contact one of the emergency contact persons to pick up your child. You must provide local emergency contacts and information on how to reach them in case of emergency.
- Your child will be made comfortable and offered a quiet place to rest until you arrive.
- If your child leaves another program or school during the regular school day due to illness, (s)he may not attend my child care that same day.

_____ I am certified in Medication Administration. I administer prescription and nonprescription in my child care. You must give me written authorization to administer.

_____ I am not certified in Medication Administration and cannot administer prescription or nonprescription in my child care.

- I can administer nonprescription topical skin products, such as baby lotion, diaper ointment, teething gel and sunscreen, with written authorization to administer.
- You must provide a written allergy care plan if your child has allergies to food or medication and inform me of any food sensitivities or dietary restrictions.

You will be asked to pick up your child who has:

- Fever with behavior changes or signs or symptoms of illness: an oral temperature over 101°F or under the armpit (axillary) temperature over 100°F
- Diarrhea

- Vomiting

***In cases of fever, diarrhea and/or vomiting, the child should not return to care until 24 hours have passed since the last sign of the symptom.*

- Sore throat or difficulty swallowing
- Headache or stiff neck
- Severe itching or rashes
- Mouth sores
- Significant tiredness, irritability, crying
- Difficulty breathing, chronic coughing or wheezing
- Any contagious condition including ringworm, bedbugs, head lice, or pink eye,
- Unusual nasal discharge
- Constant pain in the stomach
- Behavior that seems slow, confused, disoriented.

These symptoms may or may not be associated with a communicable illness. Without consultation from a health care professional it is impossible to determine the nature of the illness. Therefore you will need to pick up your child for further evaluation.

You will be asked to bring a note from a doctor or health care professional stating the child may return to child care when the illness is no longer contagious.

- You are required to inform me within 24 hours if your child or a member of your immediate household develops a communicable disease as defined by the Virginia State Board of Health (in this chapter).
- You must report life-threatening diseases immediately.
- I will notify all parents within 24 hours if a communicable disease is reported at my child care.
- Health Department regulations governing periods of infection and exclusion will be enforced.

If you would like to ask a health care professional about illness and disease, call the Health Department's Epidemiology (EPI) Nurse at 703-246-2433 between 8 a.m. and 4:30 p.m., Mondays - Fridays. There is no charge for this service.

I understand and agree to follow the terms of this child care sick policy.

Parent Signature

Date

Provider Signature

Date